



# **Health Information Technology Council April Update**

*April 7, 2014*



# Agenda



## Today's Agenda:

1. **Meeting Minutes approval [5 min]**
2. **Client Implementation Update [20 min]**
  - a) Holyoke Medical Center: Query & Retrieve – Carl Cameron
3. **MeHI Update [20 min] – Laurance Stuntz**
4. **Policy & Advisory Group Update [20 min] – Micky Tripathi**
  - a) Consent Update
5. **HIway Implementation & Support Update [20 min] – Manu Tandon**
  - a) HIway Release Schedule
  - b) Communications and Outreach Update
  - c) HIway Operations Update
  - d) HISP-HISP Update
  - e) Phase 2 Implementation Update
6. **Wrap up [5 min]**



## Discussion Item 1: Client Implementation Update

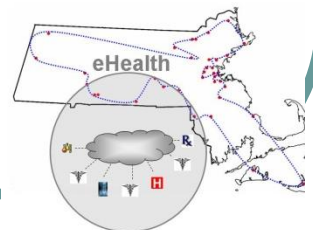
— Holyoke Medical Center: Query & Retrieve

# HealthConnect Clinical Data Exchange and Direct Messaging

*Presentation to the HIT Council*

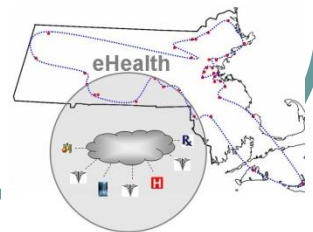
*April 7, 2014*

**Carl Cameron**  
**Vice President of Operations and CIO**

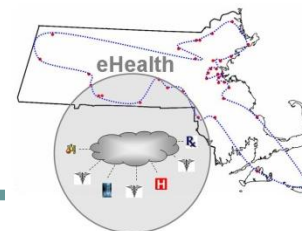
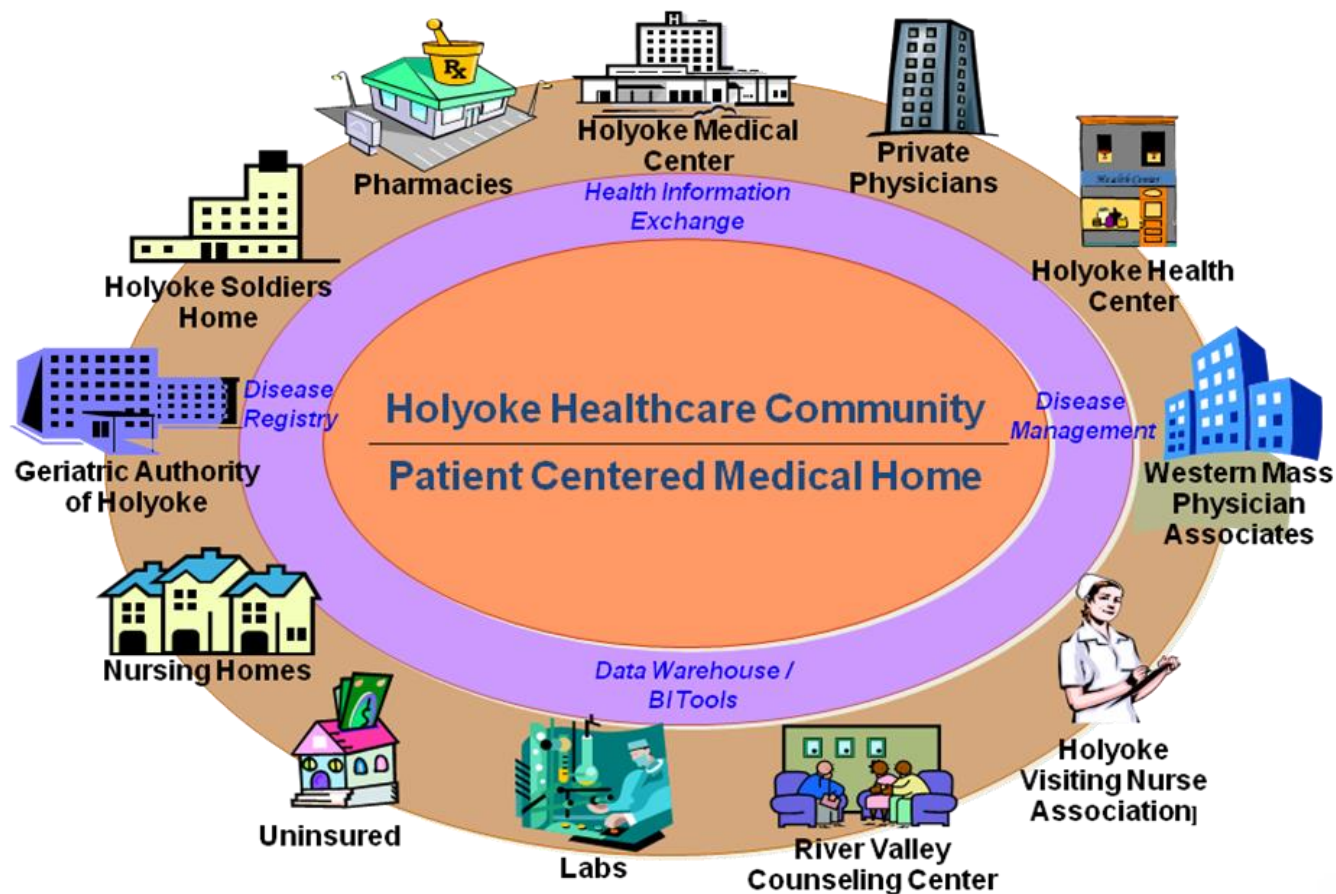


## Background

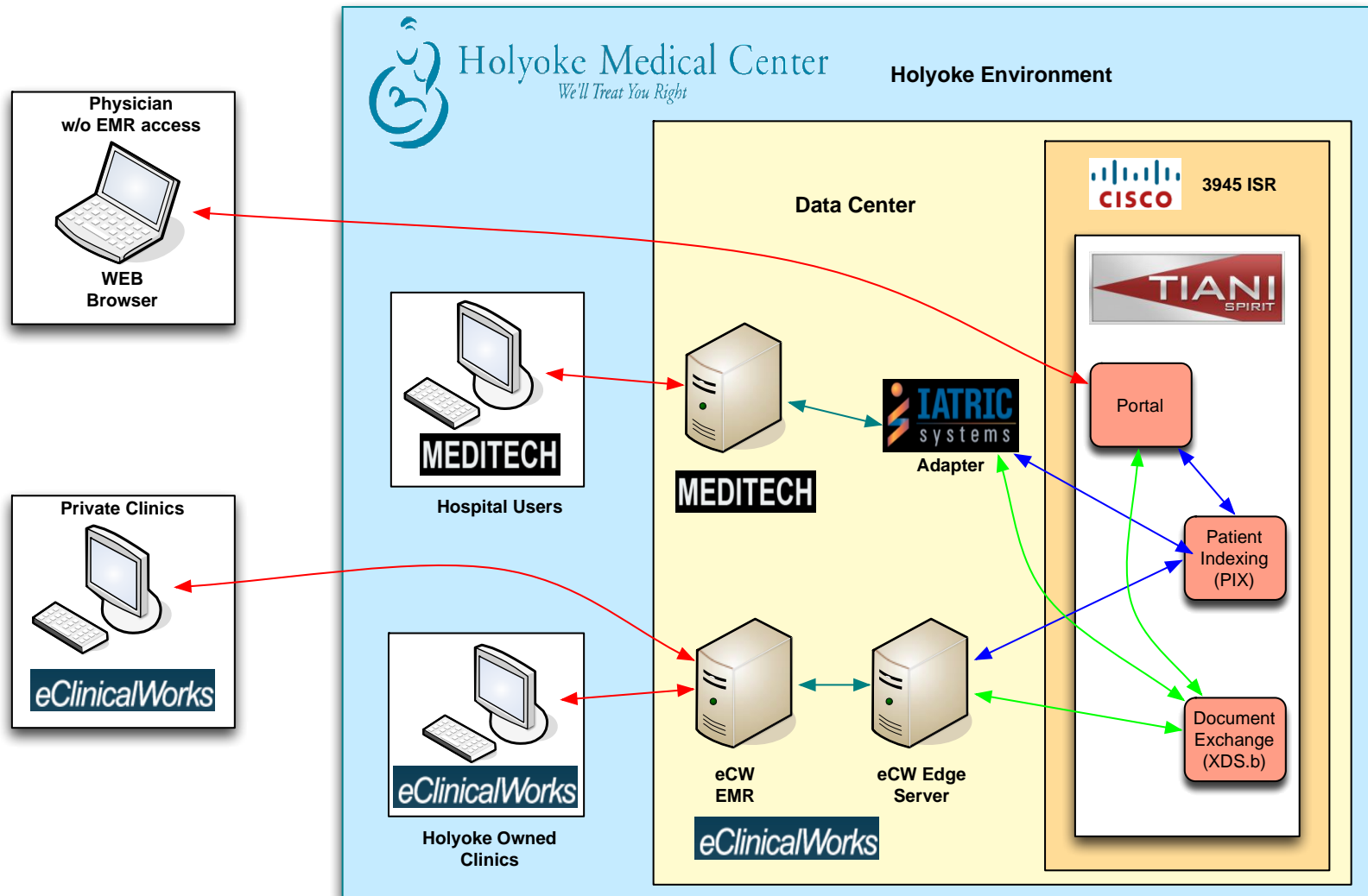
- Holyoke Medical Center providing quality, efficient care since 1893
- Serves a population of 180,000 in surrounding cities and towns
- 198 bed facility with 1,200 employees
- Annually, Holyoke admits over 6,500 patients with over 45,000 ER visits
- 75% of Holyoke Medical Center's revenue base is funded by Medicaid and Medicare
- Member of Valley Health Systems which includes Holyoke Visiting Nurse Association, Western Massachusetts Physician Association and River Valley Counseling Center



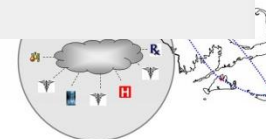
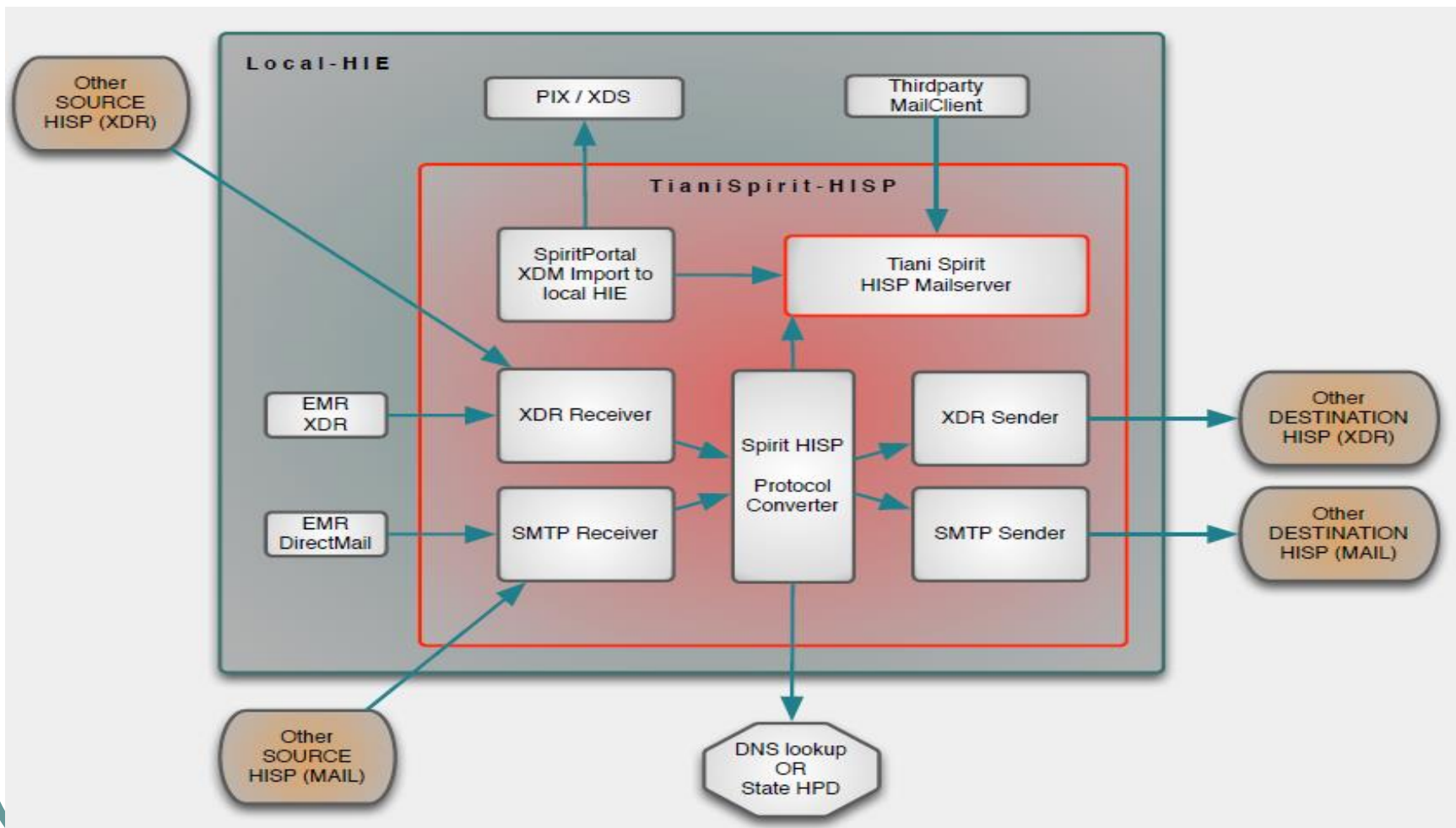
## Vision for an Integrated Healthcare System



## Holyoke HealthConnect Clinical Repository

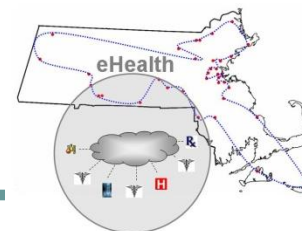
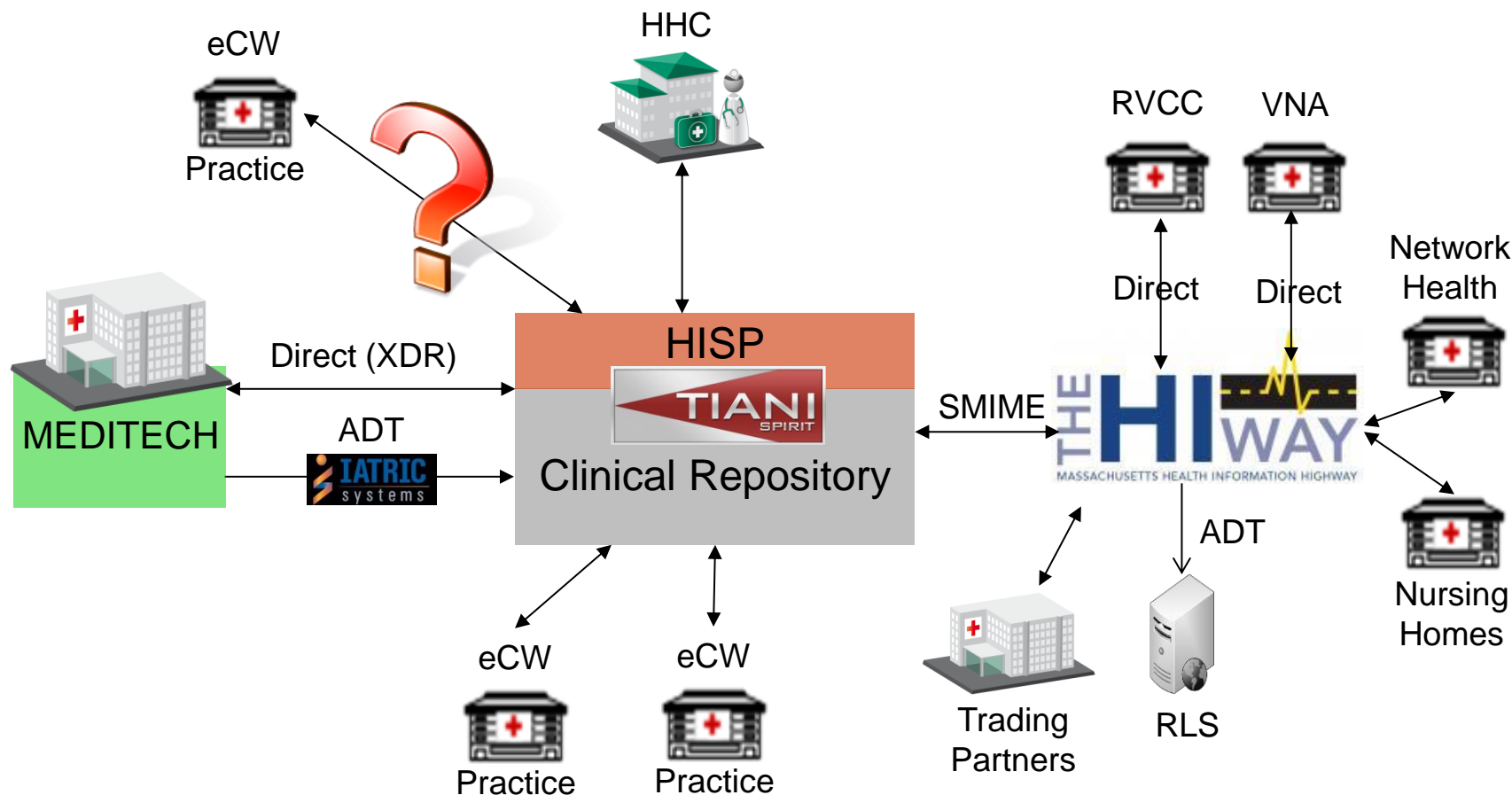


## Holyoke HealthConnect HISP



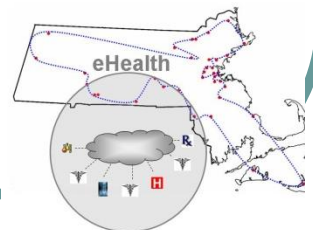


## Holyoke HealthConnect Solution



## Utilize Mass Hlway To Improve Patient Care

- Admission notification sent to PCP
- ED Discharge Summary and Summary of Care Document to PCP
- Discharge Summary and Summary of Care Document to manage chronic disease patients utilizing navigators or case managers
- Closed loop referrals between PCP and Specialist
- Behavioral health referrals
- Enable long-term post-acute care transitions
- Public Health Reporting: Electronic Lab Reporting, Immunization Information System, and Syndromic surveillance data
- Integration with Department of Public Health e-Referral system

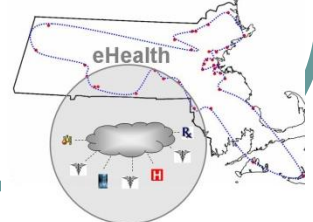


## Query and Retrieve Functionality

- Evaluate and develop new clinical work flows – Emergency Department, Medical Records, and Surgery
- Episodic vs. Cross Continuum Care
- Prevent medical errors such as drug-to-drug or allergic reactions
- Reduce redundant diagnostic testing

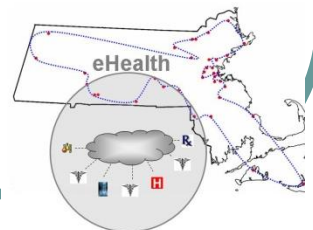
## HIWay Phase 2 Adoption Timeline

- ADT feed to production on April 3<sup>rd</sup>
- Implement new consent process by May 15<sup>th</sup> including new consent forms, educational material, and staff training
- Transmit “Y” consents by June 15<sup>th</sup> , expect 7,000 relationships published to RLS in first month



## Lessons Learned

- Continue to be many connectivity issues between disparate EMR systems
- Vendors slow to respond to HMC needs and requirements
- Clinical work flow changes are overwhelming
- Physician documentation is now visible
- Security and patient consent processes need to be changed and monitored
- Education and outreach to the community are critical for success





## Discussion Item 2: MeHI Update

# MeHI Update on Activities for the HIT Council



**MeHI**  
MASSACHUSETTS  
eHEALTH INSTITUTE



# EHR Adoption Preliminary Survey Results

EHR Adoption	Affiliated	Independent	Overall
Primary Care	100%	95%	96%
Specialists	91%	81%	85%
Rehabilitation	100%	74%	79%
Behavioral Health	100%	55%	63%
Dental	100%	55%	56%
Long-Term Care	85%	28%	55%

MeHI Sector Focus under Ch. 224

- “Affiliated” organizations have largely adopted EHRs
- MeHI will try to leverage solutions that have worked well
- Provider types that don’t fully qualify for Meaningful Use Incentives are lagging behind in adoption

# MeHI Vision, Mission, and Goals

## VISION

Massachusetts is the global eHealth leader. Our connected communities enjoy better health at lower cost and serve as models of innovation and economic development.

## MISSION

To engage the healthcare community and catalyze the development, adoption and effective use of health IT

## GOALS

### Adoption



### Support Health Reform

- ✓ Better Health
- ✓ Better Care
- ✓ Lower Costs

### Consumer eHealth Engagement

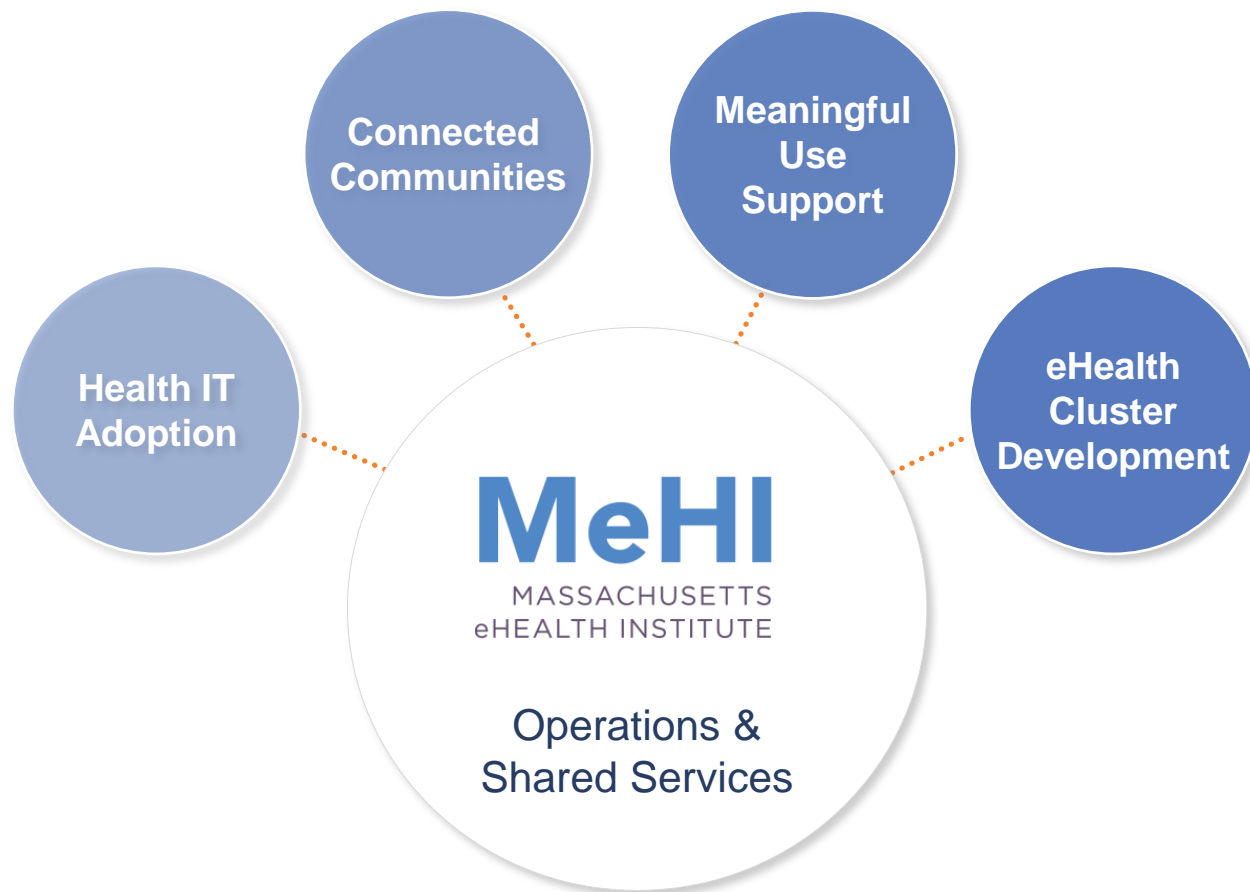


### Grow & Promote Innovation & eHealth Cluster





# MeHI Initiatives 2014 - 2015



## CORE VALUES

Innovation • Insight • Collaboration • Accountability

- Approximately 80% of REC members are at Meaningful Use and another 10% have submitted Medicaid MU applications
- No Cost Extension of the REC funding through February 2015
- ONC approved plan to use funds to build and pilot services to support
  - EHR Selection and Implementation (continue REC model)
  - Meaningful Use attestation
  - Privacy/Security education and assessment
  - Consumer eHealth Readiness assessment
  - Physician Quality Reporting System support
- Tools
  - Portal built by NJ-HITEC, the REC in New Jersey to support these services
  - National eHealth Collaborative Patient Engagement Framework

# eHealth Cluster Development

## Massachusetts eHealth Cluster

Continued growth of the nation's leading eHealth economy which includes electronic health records, telehealth, mobile health, and big data solutions.

[mehi.masstech.org/eHealthMA](http://mehi.masstech.org/eHealthMA)



@MassEHealth  
Updates #eHealthMA

2014

200+ companies / \$8 billion  
5000+ employees



2020

400+ companies / \$15 billion  
15,000+ employees



## Stakeholders

eHealth  
Companies

Venture  
Capitalists

Care Providers

Payers

Academia

Associations

Government

## Programs

Stakeholder  
Collaboration &  
Engagement

Workforce  
Development  
& Training

Education &  
Promotion

Partnerships &  
Matchmaking



## Discussion Item 3: Policy & Advisory Group Update

### — Consent Update



# Community Consent Approach



## **Approach:**

- Community developed materials to implement consent containing:
  - Sample Consent Form
  - Sample Patient Education Materials
  - Sample Staff Training Materials
- All materials are recommended, but not required. Organizations may use them on their own or incorporate the content into existing/new materials.

## **Progress:**

- Drafts of patient education materials, consent form and staff training materials have been co-developed by EOHHS, MAeHC and Advisory Groups [Several Advisory Group members also vetted patient education materials with other consumers/patients]
- Patient education materials were reviewed/edited by a health literacy expert.
- Final draft of the patient education materials has been handed out to you today.

## **Next Steps:**

- Present finalized materials to community & post on HIway site
- Have community spread word and implement *[feedback loop for continuous improvement]*



## Discussion Item 4: Mass Hlway Update

- Hlway Release Schedule
- Communications and Outreach Update
- Hlway Operations Update
- HISP-HISP Update
- Phase 2 Pilot Update



# HIway Release Schedule



## Mass HIway 2014 Development Timeline

Activity	Target date
Opioid Treatment Program Node Go-Live [ <i>Development Complete, Finalizing Provider Testing</i> ]	<del>March 2014</del> <b>April 2014</b>
Cancer Registry Node Go-Live	April 2014
Webmail Upgrade Go-Live (CCDA Editor, shared folders to support SEE application)	April 2014
Meditech XDR Solution Go-Live (enables providers to send/receive Direct messages from their Meditech EHR)	April 2014
HISP to HISP Solution Go-Live (enables pilot HISP group to connect to the HIway – eCW, Surescripts, SES)	April 2014
Healthcare Provider Portal	<b>Release 1 – June 2014</b> <b>Release 2 – Q3 2014</b>
eReferral Phase 1 Node Go-Live (enables bi-directional communication on health related targets given from HPOs to CBOs such as YMCA, Tobacco quit lines, etc.)	<b>Q2 2014</b>
Childhood Lead Poison Prevention Program Node Go-Live	<b>Q3 2014</b>
Relationship Listing Service Release 2 (Web service access, eMPI tuning, AIMS integration, Provider Notifications, etc.)	Q3 2014



## **Webinar Series Launch (Mass HIway/MeHI)**

- **What:** Mass HIway Webinar: First Steps - Getting Enrolled
  - Benefits, Agreement overview, onboarding preview
- **When:** Thursday May 8th, at 12 p.m.
- Register: <https://www2.gotomeeting.com/register/778556666>
- Upcoming topics: Consent (community discussion), Provider Directory (training)

## **Query & Retrieve Education**

- 2 Page Patient FAQ for consent completed
- Query & Retrieve presentations out for comment
  1. Training for point of consent staff
  2. Overview for management/administration

## **New Mass HIway website**

- Expected Summer





## March Participation Activity

### **8 New Participation Agreements completed in March:**

- Acton Medical Associates
- Advanced Dermatology
- Dermatology Services
- Edward M Kennedy Community Health Center
- HealthAlliance Hospital
- Stephen Rosenthal, MD
- Signature Healthcare Brockton Hospital
- Sturdy Memorial Hospital

**Current Total = 140 Mass HIway Participant Organizations**



## March Connection Activity

### 1 Organization Went Live in March.

- Stephen Rosenthal, MD, went live
- Major focus during March was on software suppliers and HISPs testing connections to the Mass HIway, which will enable many new HIway Participants to Go Live, and some current Participants to use new connections, starting in April.
- EHR Vendors\* and HISPs actively testing include:
  - Allscripts
  - Azara\*
  - Cerner\*
  - CPSI\*
  - eClinicalWorks
  - GE/Qvera\*
  - MEDITECH\*
  - OCHIN\*
  - Secure Exchange Solutions (SES)
  - SMART, Inc.\*
  - Surescripts

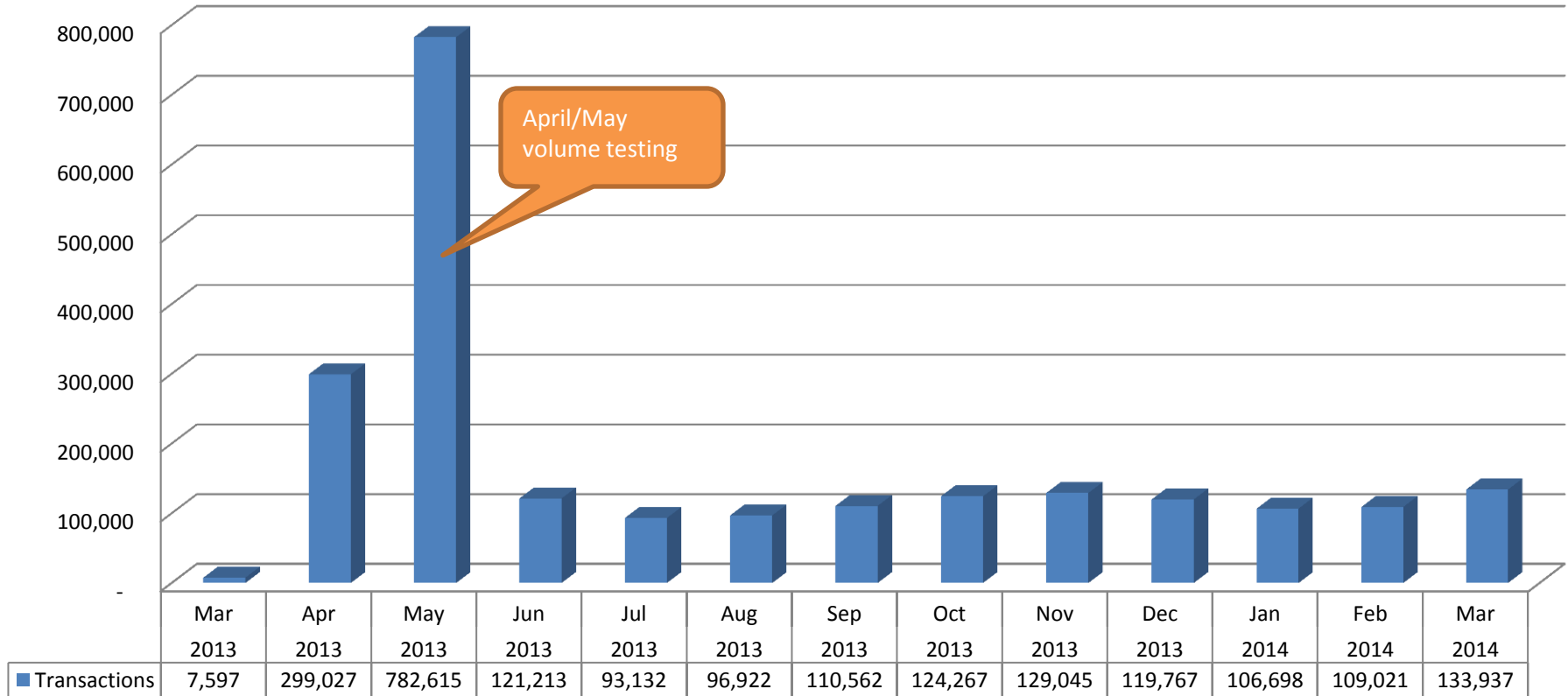
**Current Total = 105 Live Mass HIway Connections**



## March Transaction Activity

**133,937** Transactions exchanged during March

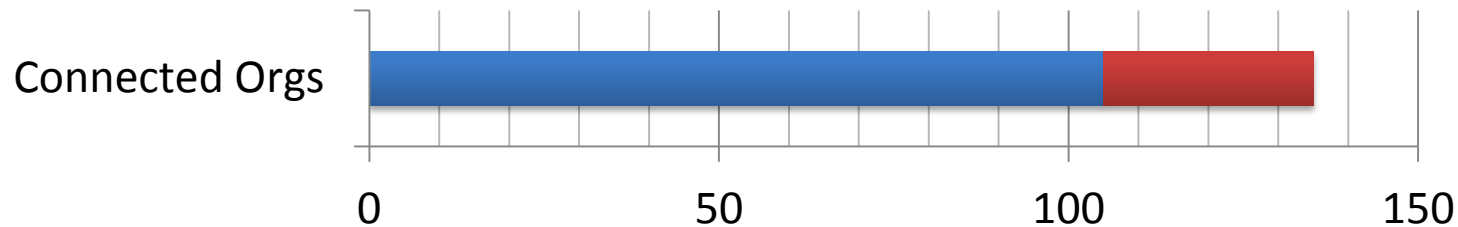
**2,230,494** Total Transactions (inception to date)



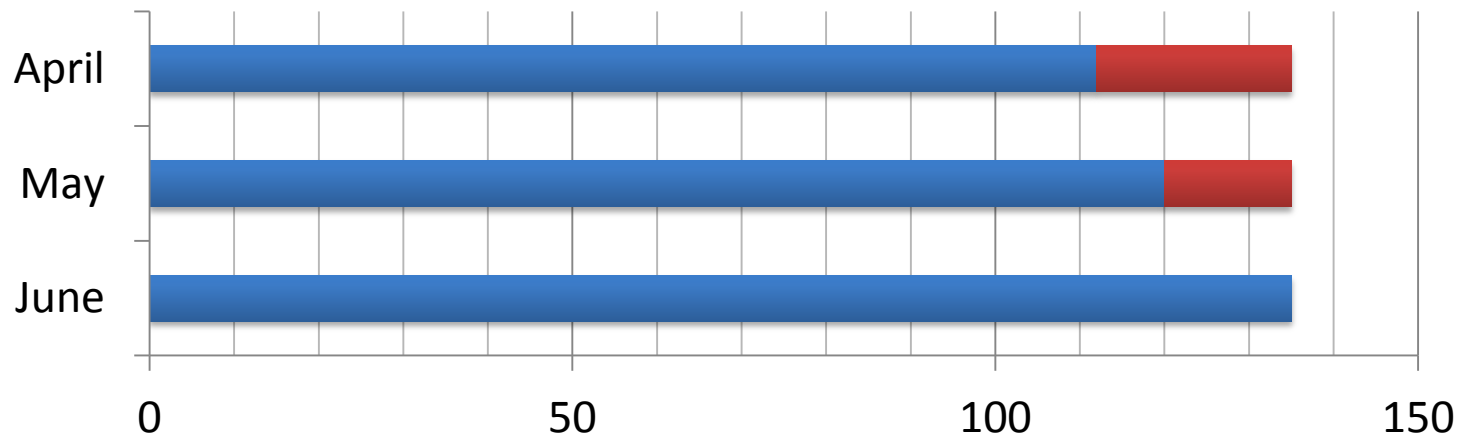


## Mass HIway Connection Forecast

**Goal:** Connect over **135** organizations to the HIway by June 30, 2014



## Forecast:





# HISP to HISP Connectivity

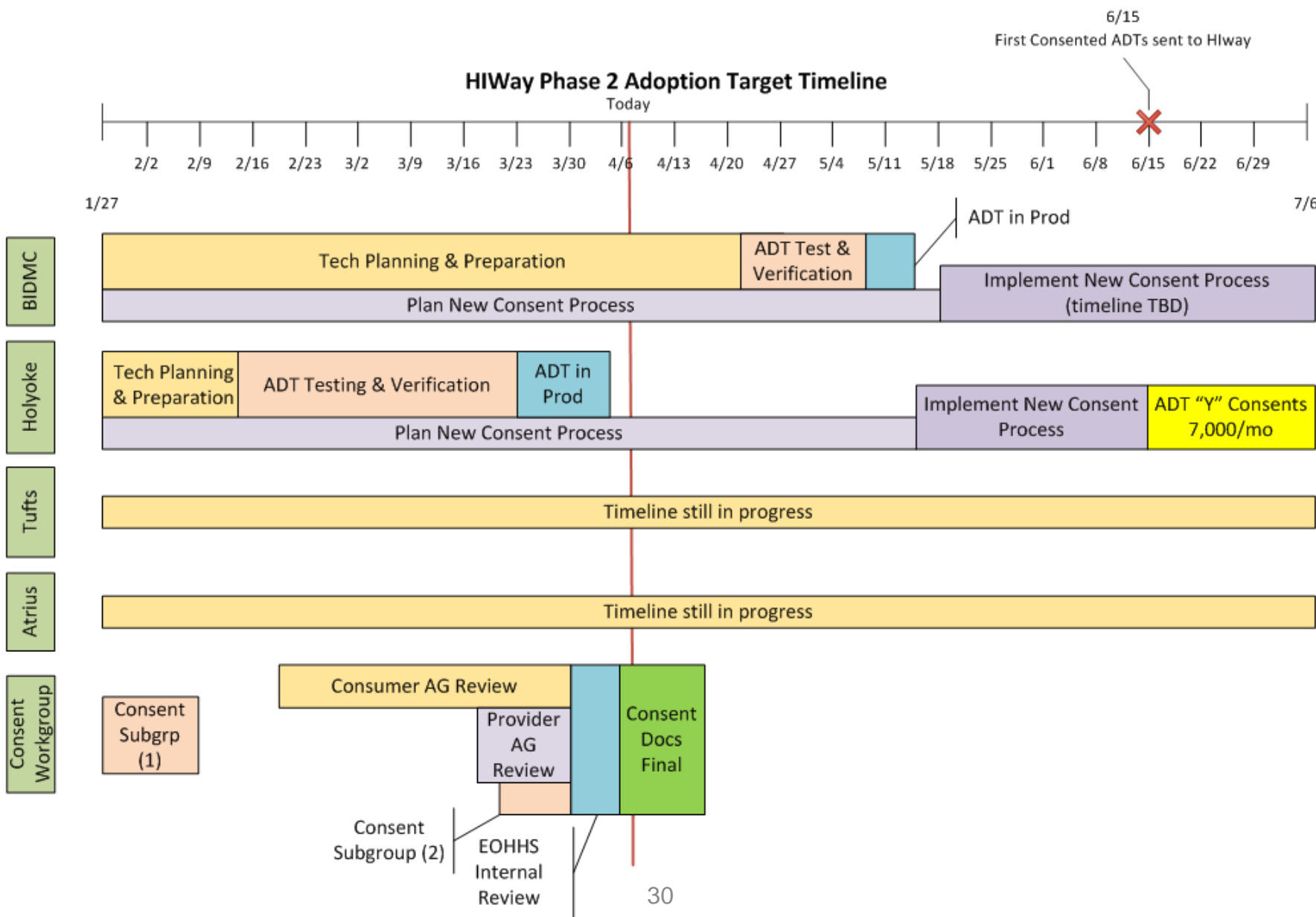


HISP Org	Current Status	Target Date
SES	End-to-End Test preparation*	Apr-14
eClinicalWork	End-to-End Test preparation*	Apr-14
SureScripts	End-to-End Test preparation*	Apr-14
Alere	Ready to begin Testing with Hlway	TBD
AthenaHealth	Initial Discovery	TBD
AllScripts	Initial Discovery	TBD
Medfx	Completed Basic Testing	TBD
NexJ	Initial Discovery	TBD
McKesson	Completed Basic Testing	TBD
Aprima	Initial Discovery	TBD
ClaimTrak	Completed Basic Testing	TBD

\*HISP to HISP solution in final stages of UAT to be released for end-to-end testing on April 11th



# Phase 2 Implementation Plan





## Discussion Item 5: Wrap Up



# HIT Council meeting schedule



## HIT Council 2014 Meeting Schedule\*:

- January 13
- February 3
- March 10
- April 7
- **May 5**
- June 9
- July 7
- August 4
- September 8
- October 6
- November 3
- December 8

*\*All meetings to be held from 3:30-5:00 pm at One Ashburton Place, 21st Floor, Boston, unless otherwise noted*





# The Mass HIway: Fact Sheet for Patients

## The Mass HIway: Fact Sheet for Patients



**T**he Mass HIway is a secure statewide computer network that allows your healthcare providers to safely and quickly send your health information to where it is most needed. A doctor or nurse can care for you better when he or she has important information about your health history. The Mass HIway is designed to make this safer and faster. The goal is better care coordination and quality for you and your family.

### What is the Mass HIway?

- Mass HIway is a secure statewide computer network that can help healthcare providers coordinate your care. It is a new tool that can be used to:
  - » Locate other members of your healthcare team
  - » Securely request, send, and receive your health information
- It's voluntary. State Law requires all healthcare organizations get patient consent (by signing a consent form) before they may use the Mass HIway for that patient's care.
- The Mass HIway is managed by the Commonwealth of Massachusetts' Executive Office of Health and Human Services (EOHHS).

### How does the Mass HIway help me?\*

- If you are in an accident or have a sudden illness and go to the emergency room, the hospital might not know your medical history. The emergency room doctor can use the Mass HIway to find out if you are allergic to any medicines or if you have other health problems.

- If you were discharged from the hospital and are going for a follow-up appointment, the hospital can use Mass HIway to send your doctor a note about your hospital stay. Then, you and your doctor could spend time talking about your follow-up care instead of paperwork.
- If you get tests done, the doctor can use the Mass HIway to send the results to other members of your healthcare team, like your specialist. This helps them coordinate your care. It can also save you time and money by reducing the need for repeat tests.
- If you have a chronic condition your health insurer case manager can use the Mass HIway to communicate with your doctors to coordinate your care and help you stay healthy.
- If you see a new doctor, he or she can use the Mass HIway to locate other organizations where you have received care. Your new doctor can request your health information so they can treat you better.

- Remember, the Mass HIway is a new tool, so all of your providers may not be using it yet. There will be more benefits for you as more healthcare organizations use the Mass HIway.

### Who can use the Mass HIway and why?

- Mass HIway may only be used by healthcare organizations (like doctors' offices, clinics, hospitals, public health agencies, and health insurers).
- Mass HIway may only be used for information sharing as allowed by law (to plan treatment, to get payment from insurance companies, and operations, like reporting care quality). Speak to your doctor or office staff about what information is sent and why.

### Does the Mass HIway store my health information?

- No. The patient's medical record itself is **not** part of the Mass HIway system. The Mass HIway cannot see any health information sent over the network. The medical record is stored by the healthcare organization, the same way it is today.



# The Mass Hlway: Fact Sheet for Patients



## What happens when I give my consent?

- **With your consent, you allow** the healthcare organization to send the following information about you to the Mass Hlway to be stored in a secure database. This data is used to search for other healthcare organizations that have health information about you for request.
  - » full name
  - » date of birth
  - » home address
  - » e-mail
  - » phone number
  - » gender
  - » medical record number
- **With your consent, you allow** your relationship to that organization to be listed in the Mass Hlway network. A relationship means that you have received care at that organization and have given consent to that organization to use the Mass Hlway. Your relationship can only be seen by other organizations where you have given consent.
- **With your consent, you allow** healthcare providers or other health workers at that organization to use Mass Hlway to request, send, and receive health information about you for your care. Examples of other health workers could be a lab technician or someone in the medical records office. Speak with your doctor or the office staff about

## What if I say 'No' or don't sign the consent form? What if I change my mind?

- That's ok. But, if you do not consent for the Mass Hlway, **your providers will continue to send your health information using other ways**, like fax or the mail. But that takes time and it's hard to control who reads a fax or opens a piece of mail, so your information may not always be protected. **The Mass Hlway is designed to make this safer and faster.**
- Each healthcare organization will have its own process for you to change your choice, so speak with your doctor or the office staff to learn how.

## How does the Mass Hlway protect my information?\*

The Mass Hlway has security measures in place to protect your information that aren't true of current methods, like fax, mail, or portable media like a CD or USB (flash drive), such as:

- Using a special code so that only authorized providers can read the information sent over the Mass Hlway (this is known as encrypting data).
- Encrypting the Mass Hlway database of demographic information and

- Having a way to oversee who has access to the system and who has used it for a particular patient's healthcare. You can get a copy of this list by speaking with your provider or the office staff and asking for an "accounting of disclosures".
- A user must have valid usernames and strong passwords.
- All healthcare organizations using the Mass Hlway have signed a contract to make sure they follow all state and federal laws to protect your information.
- You will still need to give special permission for providers to request and receive certain sensitive information. This includes HIV and genetic testing results and substance abuse.
- There is always a risk with technology, but the Mass Hlway uses the highest security standards to protect your information. Most of the data breaches you hear about are from insecure laptops being lost, or information being sent without encryption (coding), like a CD or a USB (flash drive). The Mass Hlway can help replace these methods.

